

BEST AVAILABLE COPY

CLAIMS ONLY						Application Number 09/996,143	Filing Date				
						Applicant(s)					
						* May be used for additional claims or amendments					
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT						
	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	
1							51				
3							52				
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47							94				
48							95				
49							96				
50							97				
Total Indep							Total Indep				
Total Depend							Total Depend				
Total Claims							Total Claims				